

**Arlington Housing Authority**  
**Homeless Housing and Services Program**  
**Homeless Prevention Application Packet Instructions and Check List**

Please include documentation for any and all of the following sources of income from all members in your household. The verification of income received by members of your household must be submitted as an attachment to your application. Applications that are incomplete will be denied.

- ☐ **TANF** - Texas Department of Human Services computer printed statement of current benefits or cancellation of benefits letter, dated within the last 60 days
- ☐ **EMPLOYMENT VERIFICATION** - Four current and consecutive pay check stubs (last one no more than 60 days from the date of your appointment) with year-to-date earnings or a letter from employer on their letter head which includes their fax number
- ☐ **ALIMONY** - Notarized letter from the provider, and/or payment history
- ☐ **UNEMPLOYMENT** - Original award letter from Unemployment Compensation and current payment history printout or exhaust letter, dated within the last 60 days
- ☐ **PENSION/ANNUITY** - Award letter including contact number and copy of current check (last one no more than 60 days from the date of your appointment)
- ☐ **SSI/SOCIAL SECURITY BENEFITS** - Award letter and current statement from the Social Security Administration dated within the last 60 days
- ☐ **BANK ACCOUNTS/ASSETS** - A current savings account statement, 2 current checking account statements, a current statement for mutual funds, annuities, trust, inheritances, and legal settlements.
- ☐ **LEASE**- A copy of your current lease agreement (Please include all pages of the lease).
- ☐ **COPY OF YOUR EVICTION NOTICE**- Your Eviction notice and / or notice to vacate letter.
- ☐ **UTILITY DISCONNECT NOTICE** - Copy of your most current past due electric, water, and gas bills.
- ☐ **HOUSEHOLD EXPENSES** – Copies of the last two electric, water, and gas bills.
- ☐ **INCOME** - If you claim no (\$0) income due to loss of benefits, you will need to provide the documentation indicating that your benefits have been terminated.
- ☐ **IDENTIFICATION** - Copies of photo ID, social security cards, and birth certificates for **ALL** household members.

**EVICTON PREVENTION / HOMELESS PREVENTION**

Ask your landlord to complete the ***Landlord Application and Agreement*** form and fax the information to the case manager at **(817) 962-1260. FAXED FROM LANDLORD ONLY.**

After you have completed the entire *HHSP Homeless Prevention application* and collected all the required verifications (above), please submit your application and attachments at the Arlington Housing Authority office OR Fax the information to **(817) 962-1260.**

*Arlington Housing Authority, 501 W. Sanford, Suite 20, Arlington, TX 76011*

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